## PATENT APPLICATION FEE DETERMINATION RECORD

tive December 8, 2004

Application or Docket Number 10/53 4 3 4 8

| CLAIMS AS FILED - PART I   |  |  |   |   |  |                               |          | SMALL ENTITY        |                        |                  | OTHER THAN          |                        |
|--|--|--|---|---|--|-------------------------------|----------|---------------------|------------------------|------------------|---------------------|------------------------|
| L  |  |  | (Column 1) (Column 2)                     |   |  |                               | TYPE     |                     | OR<br>-                | SMALL            | ENTITY              |                        |
| U.S. NATIONAL STAGE FEES   |  |  |   |   |  |                               |          | RATE                | FEE                    |                  | RATE                | FEE                    |
| BASIC FEE  |  |  | SMALL ENT                                 | . = \$ 150                                  | LARGE ENT. = \$ 300                    |                               | 7        | BASIC FEE           | 150                    | OR               | BASIC FEE           |                        |
| EXAMINATION FEE  |  |  | Satisfies PCT A<br>(4) = \$50             |   | All other situations = \$ 100 / \$ 200 |                               |          | EXAM. FEE           | 100                    |                  | EXAM. FEE           |                        |
| SEARCH FEE   |  |  | U.S. is ISA = \$ ALL other co \$ 200 / \$ | untries =                                   |  | her situations = 250 / \$ 500 |          | SEARCH FEE          | ZW                     |                  | SEARCH FEE_         |                        |
| FEE FOR EXTRA SPEC. PGS.   |  |  | min                                       | us 100 =                                    |  | / 50 =                        |          | X \$ 125 =          |                        |                  | X \$ 250 =          |                        |
| TOTAL CHARGEABLE CLAIMS  |  |  | 39 mi                                     | nus 20 =                                    | +                                      | 19                            |          | X \$ 25 =           | 475                    | OR               | X \$ 50 =           |                        |
| INDEPENDENT CLAIMS   |  |  | / m                                       | ninus 3 =                                   | *                                      |                               |          | X \$ 100 =          |                        | OR               | X \$ 200 =          |                        |
| MU   | TIPLE DEPEN                                    | DENT CLAIM PR  | ESENT                                     |   |  |                               |          | + \$ 180 =          | 180                    | OR               | + \$ 360 =          |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |  |  |   |   |  |                               |          | TOTAL               |                        | OR               | TOTAL               |                        |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)             |  |  |   |   |  |                               | SMALL E  | ENTITY              | OR                     | OTHER<br>SMALL E |                     |                        |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |   | HIGHE<br>NUME<br>PREVIO<br>PAID F           | BER<br>USLY                            | PRESENT<br>EXTRA              |          | RATE                | ADDI-<br>TIONAL<br>FEE |                  | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *  | Minus                                     | **  |  | =                             |          | X \$ 25 =           |                        | OR               | X \$ 50 =           |                        |
|  | Independent                                    | +  | Minus                                     | ***   |  | =                             |          | X \$ 100 =          |                        | OR               | X \$ 200 =          |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |   |   |  |                               |          | + \$ 180 =          |                        | OR               | + \$ 360 =          |                        |
| TOTAL ADDIT.<br>FEE  |  |  |   |   |  |                               |          |                     |                        | OR               | TOTAL ADDIT.<br>FEE | -                      |
|  |  |  |   |   |  |                               |          |                     | •                      |                  |                     |                        |
| 18   |  | (Column 1)  CLAIMS  REMAINING  AFTER  AMENDMENT  |   | (Colum<br>HIGHE<br>NUMB<br>PREVIO<br>PAID F | ST<br>ER<br>USLY                       | (Column 3) PRESENT EXTRA      |          | RATE                | ADDI-<br>TIONAL<br>FEE |                  | RATE                | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT B  | Total  | • .  | Minus                                     | **  |  | Ξ                             |          | X \$ 25 =           |                        | OR               | X \$ 50 =           |                        |
|  | Independent                                    | •  | Minus                                     | ***   |  | =-                            |          | X \$ 100 =          |                        | OR               | X \$ 200 =          |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |   |   |  |                               |          | + \$ 180 =          |                        | OR               | + \$ 360 =          |                        |
|  |  |  | ···                                       |   |  |                               |          | TOTAL ADDIT.<br>FEE |                        | OR               | TOTAL ADDIT.<br>FEE |                        |
| **   | If the "Highest Nu                             | rmn 1 is less than the<br>rmber Previously Pal<br>rmber Previously Pal<br>nber Previously Pald | d For" IN THIS SP<br>d For" IN THIS SP    | ACE is less<br>ACE is less                  | than '20<br>than '3',                  | ', enter "20".<br>enter "3".  | I in the | e appropriate box   | in column 1.           |                  |                     |                        |